

MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM

DRINKING WATER STATE REVOLVING FUND LOAN APPLICATION

FOR OF	FICE	USE	ONL	Y
DATE RECE	IVED			

LOAN NUMBER

This application is for a Drinking Water State Revolving Fund Loan described in 10 CSR 60-13.020.

Submit to: Missouri Department of Natural Resources, Financial Assistance Center, P.O. Box 176, Jefferson City, MO 65102-0176. Please type or print legibly.					
GENERAL INFORMATION					
1. PUBLIC WATER SUPPLY NAME		PUBLIC WATER SUPPLY ID I	NO.		
PUBLIC WATER SUPPLY OWNER					
2. PUBLIC WATER SUPPLY CONTACT PERSON FOR THIS DRINKING	WATER STATE RE	EVOLVING FUND LOAN PROJECT	TITLE		
MAILING ADDRESS					
CITY	STATE	ZIP CODE + FOUR		COUNTY	
TELEPHONE NUMBER WITH AREA CODE Ext.		FAX NUMBER WITH AREA CODE Ext.			
3. CONSULTING ENGINEER					
CONSULTANT MAILING ADDRESS					
CITY		STATE	Z	IP CODE + FOU	UR
CONSULTANT TELEPHONE NUMBER WITH AREA CODE CONSULTANT FAX NUMBER WITH AREA CODE Ext.					
4. POPULATION SERVED BY PUBLIC WATER SUPPLY					
5. U.S. CONGRESSIONAL DISTRICT NUMBER STATE SE	NATE DISTRICT N	NUMBER(S)	STATE	REPRESENTA ^T	TIVE DISTRICT NUMBER(S)
6. CERTIFIED OPERATOR AND EMERGENCY OPERATING PLAN					
THE APPLICANT HAS PROVIDED:					
☐ Documentation the Public Water Supply has a certified chief operator or expects to have prior to loan award.					
☐ Documentation the Public Water Supply has an emergency operating plan or expects to have prior to loan award.					
PROJECT DESCRIPTION					
DESCRIBE THE MAJOR COMPONENTS OF THE PROJECT. THE PROJ CONSTRUCTION IMMEDIATELY FOLLOWING THE DRINKING WATER S					

7. ESTIMATED PROJECT COST INFORMATION		8. BREAKDOWN OF STATE REVOLVING FUND ELIGIBLE COST PER DESIGNATED CATEGORIES:			
Cost Estimate Dated:		I.	Treatment		\$
Administrative/Legal	\$	II.	Transmission an	d Distribution	\$
Engineering Planning and Design	\$	III.	Storage		\$
Construction Engineering Services	\$	IV.	Source		\$
Engineering Inspection	\$	V.	Land Acquisition		\$
Construction	\$	VI.	Purchasing of O	ther Systems	\$
Other Costs (labs, upgrades, automation, etc.) Specify:	\$	VII.	Refinancing		\$
Interest During Construction	\$	VIII. O	ther Specify:		\$
Contingency (10 percent of Construction)	Contingency (10 percent of Construction) \$		9. PROJECTED REPAYMENT SOURCE		
Total Project Costs	\$0				
Funding Sources other than the Drinking Water Fund (specify whether loan or grant):	State Revolving		Jser Fees		
•	\$		General Funds		
•	\$		Sales		
BALANCE (Total project costs minus other funding sources)	\$		Other (Please, desc	ribe):	
Cost of Issuance (Estimate 3% of Balance)	\$				
AMOUNT OF LOAN REQUEST (Balance plus Cost of Issuance)	\$	CHECK (ONE)	N PLACE AND AVAILABLE AT THE Specify:	IIS TIME?
10. ANTICIPATED DEBT STRUCTURE/SECURITY					
☐ General Obligation Bonds ☐ Revenue Bonds					
Amount of Bond \$ HAVE YOU PASSED BONDS FOR THIS PROJECT? (CHECK ONE) Yes No					
11. FINANCIAL INFORMATION					
Anticipated term of the loan (years)					
EXISTING CUSTOMERS			ESTIMATED CUSTOME	RS AT PROJECT COMPLETION	
WHAT IS YOUR COLLECTION DELINQUENCY RATE? percent			ARE YOU CURRENTLY Yes	FUNDING DEPRECIATION? No	
OUTSTANDING DEBT AMOUNT WHEN WAS THE LAST TIME USER FEES WERE REVIEWED?					
\$ EXISTING ANNUAL DEBT SERVICE WHEN WAS THE LAST TIME USER FEES WERE INCREASED?					
\$ 12. REVENUE LESS (MINUS) OPERATING EXPENSES FOR THE LAST FISCAL YEAR EQUALS = \$					
FROM A FINANCIAL STANDPOINT, DO YOU HAVE A COMBINED WA	ATER AND SEWER SYSTI	EM?			
PROJECT SCHEDULE (READINESS TO PRO	CEED)				
Milestone Anticipated Date					
A. Engineering Report and Facility Plan complete					
B. All other funding is secured (if necessary, bonds are voted)					
C. Engineering Plans and Specifications complete					
D. Construction start date					
E. Mandatory completion date (attach copy of compliance schedule)					

13. AFFORDABILITY (COMMUNITY WATER SYSTEMS ONLY)					
Community water systems include, for example, water supply districts, cities and subdivisions. Community water systems may be					
	or privately owned. ON SERVED	FROM THE U.S. CENSUS; MEDIAN HOUSEHOLD INCOME FOR THE SERVICE AREA			
NUMBER C	FHOUSEHOLDS				
COMMUNIT	Y(IES) BENEFITED BY PROJECT				
\$	NT AVERAGE MONTHLY WATER BILL FOR A TYPICAL HOUSEHOLD,				
ESTIMATE \$	ESTIMATED AVERAGE MONTHLY WATER BILL FOR A TYPICAL HOUSEHOLD, PER 5,000 GALLONS, FOLLOWING COMPLETION OF THIS PROJECT				
15. SAFE DRINKING WATER ACT COMPLIANCE (ONLY EXISTING PUBLIC WATER SYSTEMS ARE ELIGIBLE FOR PRIORITY POINTS UNDER THIS SECTION)					
Describe anticipated compliance benefits of the proposed project. The project for which funding is being requested must be limited to projects that will be bid for construction immediately following the Drinking Water Revolving Fund loan closing deadline. Check all of the items listed below that apply to this project and describe each item below. You must attach any other supporting documentation described on the application form.					
THIS PROJ	ECT WILL (CHECK ALL THAT APPLY):				
	Correct persistent violations of maximum contam contaminants (such as coliform, turbidity or nitrat	inant levels or treatment performance criteria for acute risk e) within the past 36 months.			
	Correct persistent violations of treatment techniq	ue requirements.			
	Correct persistent violations of maximum contaminant levels for non-acute risk primary contaminants occurring within the past 36 months.				
	Correct persistent violations of maximum contaminant levels for secondary contaminants occurring within the past 36 months.				
	Enable the Public Water Supply to comply with c	ertain anticipated federal regulations.			
DESCRIPTI	ON OR ADDITIONAL COMMENTS:				

PUBLIC HEALTH				
limited to Check a docume	the the anticipated public health benefits of the proposed project. The project for which funding is being requested must be to projects that will be bid for construction immediately following the Drinking Water Revolving Fund loan closing deadline. The space provided all items listed below that apply to the project and describe in the space provided. You must attach any other supporting entation and specifically cross-reference it in the narrative description. The Department will consider only supporting entation described on the application form.			
	Existing public water systems only: At least 51 percent of the project will address problems causing a waterborne disease outbreak attributable to the Public Water Supply by the Department of Health and Senior Services.			
	Existing public water systems only: The Public Water Supply can document its inability consistently to maintain >35 psi as a normal working pressure in the distribution system.			
	Existing public water systems only: The Public Water Supply can document its inability consistently to maintain >20 psi at all service connections.			
	Private or non-community wells or sources in the project service area are unable to consistently provide an adequate amount of potable water for general household purposes and at least 51 percent of the project addresses this need.			
THIS PROJ	JECT WILL (CHECK ALL THAT APPLY):			
	Provide a Public Water Supply with a backup well or backup interconnection with another Public Water Supply.			
	Address problem(s) with improper well construction.			
	Address unaccounted for water that exceeds 10 percent of the drinking water produced by the system, and the loss is due to leaking or broken water lines.			
five	Provide necessary modifications to a distribution system anticipated to exceed design capacity or useful life within the next years.			
	Address a demonstrated need to replace faulty pipes or substandard pipe materials.			
	Address a demonstrated need for distribution system valves and flushing devices.			
	Address a demonstrated need for looping of water mains.			
	Address an inability to maintain a disinfectant residual at all points in the distribution system.			
	Address water storage facilities in poor condition not related to inadequate maintenance.			
	Provide the Public Water Supply with a storage capacity equal to one day's average use or provide the Public Water Supply with adequate standby power.			
	Provide necessary modifications to a source or treatment facility anticipated to exceed design capacity or useful life within the next five years.			
	Address significant degradation of the quality of raw water supply.			
	Address significant degradation of the quality of finished water in storage.			
	Enable the Public Water Supply to meet existing state requirements for the treatment or storage of waste residues generated by the water treatment plant.			
	Enable repair or replacement of treatment facilities for required disinfection or turbidity removal that are severely deteriorated beyond the useful life of the facility.			
	The facility's source is vulnerable to natural disasters (such as flood or drought) or contamination.			
	The facility's treatment plan is vulnerable to natural disasters (such as flood or drought) or contamination.			
	The facility is located in a Department approved Wellhead Protection Area.			
	At least 51 percent of the project cost is for repair or replacing an existing public water system damaged or destroyed by a natural disaster. (Note: Documentation must be submitted along with a statement that adequate state or federal disaster relief is not available).			
THIS PROJ	JECT WILL (CHECK ALL THAT APPLY):			
	Provide necessary upgrades to facilities of a primary water system to continue or expand services as a regional water supplier.			
	Result in the permanent supply interconnection of two or more existing public water systems. (This includes new water systems that allow small water systems within their boundaries to consolidate).			
	Result in a regional management system responsible for the day-to-day operation of the water system.			
	Enable the Public Water Supply to enhance the water system security.			
lп	Applicants governing board has received training related to the management and operation of drinking water infrastructure			

DESCRIPTION OR ADDITIONAL COMMENTS			
CERTIFICATION			
The undersigned representative certifies the information submitted in this application is true and correct to the best of his or her knowledge and that he or she is authorized to sign and submit this application. The applicant agrees, if a loan is awarded on the basis of this application, to comply with all applicable rules and regulations of the Department of Natural Resources and the terms			
and conditions of the loan agreement. Incomplete applications v SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE		
SIGNATURE OF AUTHORIZED INFRESENTATIVE	MIL		
NAME AND OFFICIAL TITLE	TELEPHONE NUMBER WITH AREA CODE Ext.		
PREPARER'S NAME AND SIGNATURE (IF APPLICABLE)	LAL		
SIGNATURE OF PREPARER	DATE		
NAME AND TITLE	TELEPHONE NUMBER WITH AREA CODE Ext.		